

10036 U.S. PTO  
09/640111



POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ST		9-5-00
O.I.P.E. CLASSIFIER		54	10/31/00
FORMALITY REVIEW		7/1/01	
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

APPLICANTS

TITLE

IN

sub has not of

this

W/ The Pos

Form (Rev.

Claim	Final	Original	Date
1	✓	4/1/01	
2	✓	10/1/01	
3	✓	10/1/01	
4	✓	10/1/01	
5	✓	10/1/01	
6	✓	10/1/01	
7	✓	10/1/01	
8	✓	10/1/01	
9	✓	10/1/01	
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49	✓	10/1/01	
50	✓	10/1/01	

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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BEST AVAILABLE COPY